

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AK</i>	<i>1018701</i>	<i>8/31</i>
O.I.P.E. CLASSIFIER		<i>8</i>	<i>9-8-00</i>
FORMALITY REVIEW		<i>20611</i>	<i>10/16/00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	5/14/04
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
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48	✓
49	✓
50	✓

Claim	Date
Final Original	
51	5/14/04
52	✓
53	✓
54	✓
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100	✓

Claim	Date
Final Original	
101	5/14/04
102	✓
103	✓
104	✓
105	✓
106	✓
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144	✓
145	✓
146	✓
147	✓
148	✓
149	✓
150	✓

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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